

Please type a plus sign (+) inside this box

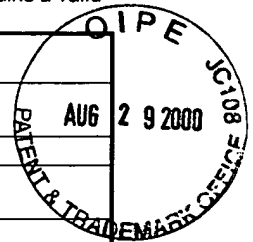


PTO/SB/01 (12-97)

Approved for use through 9/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.



DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63) <input type="checkbox"/> Declaration Submitted with Initial Filing OR <input checked="" type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16(e)) required)	Attorney Docket Number	TM00-004.US
	First Named Inventor	KUNINS, Jeff, et. al.
	COMPLETE IF KNOWN	
	Application Number	09/592,241
	Filing Date	13 June 2000
	Group Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned	

As a below named Inventor, I hereby declare that:

My residence, post office address, and citizenship are as stated below next to my name.

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**METHOD AND APPARATUS FOR
ZERO-FOOTPRINT PHONE APPLICATION DEVELOPMENT**

(Title of the Invention)

the specification of which

☐ is attached hereto
OR

☒ was filed on (MM/DD/YYYY)

06/13/2000

as United States Application Number or PCT International

Application Number 09/592,241 and was amended on (MM/DD/YYYY) (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto:

I hereby claim the benefit under 35 U.S.C. 119(h) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

(Page 1 of 2)

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

\\Never\Legal\Patents\TM00-004.US\TM00-004.US Declaration.doc (11687)

Please Type a plus sign (+) inside this box



PTO/SB/01 (12-97)

Approved for use through 9/30/00.OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of the application is not designated in the prior United States or PCT international application in the manner provided by the first paragraph of 31 U.S.C. 112. I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/028 attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith: ☒ Customer Number 24488



OR

☐ Registered practitioner(s) name/registration number listed below

Name	Registration Number	Name	Registration Number

☐ Additional registered practitioner(s) named on supplemental Registered Practitioner Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☒ Customer Number or Bar Code Label



OR ☐ Correspondence address below

24488

Name	Erik L. Oliver					
Address	Tellme Networks, Inc.					
Address	1310 Villa Street					
City	Palo Alto	State	CA	ZIP	94041	
Country	U.S.	Telephone	650-930-9000		Fax	650-930-9101

I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

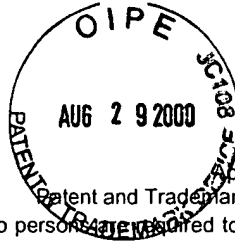
Name of Sole or First Inventor:

☐ A petition has been filed for this unsigned inventor

Given Name (first and middle (if any))				Family Name or Surname			
Jeff C.				Kunins			
Inventor's Signature						Date	7-13-00
Residence: City	San Francisco	State	CA	Country	USA	Citizenship	USA
Post Office Address	23 Roscoe Street						
Post Office Address							
City	San Francisco	State	CA	ZIP	94110	Country	USA

☒ Additional inventors are being named on the 4 supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto:

Please Type a plus sign (+) inside this box →



PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

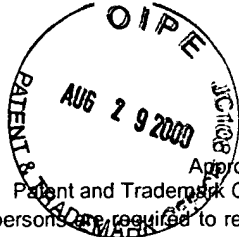
Under the Paperwork Reduction Act of 1995, no person shall be required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>1</u> of <u>4</u>
--------------------	--

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Hadi				Partovi			
Inventor's Signature						Date	
		7/7/2000					
Residence: City	San Francisco	State	CA	Country	USA	Citizenship	USA
Post Office Address							
2280 Green Street							
Post Office Address							
City	San Francisco	State	CA	ZIP	94123	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Brandon William				Porter			
Inventor's Signature						Date	
		7/11/2000					
City	Mountain View	State	CA	Country	USA	Citizenship	USA
Post Office Address							
840 E. Dana Str							
Post Office Address							
City	Mountain View	State	CA	ZIP	94041	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Matthew Talin				Marx			
Inventor's Signature						Date	
		7/12/2000					
City	Mountain View	State	CA	Country	USA	Citizenship	USA
Post Office Address							
100 No. Whisman Road, #3617							
Post Office Address							
City	Mountain View	State	CA	ZIP	94043	Country	USA

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please Type a plus sign (+) inside this box →



PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

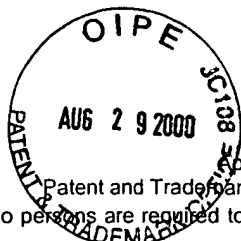
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>2</u> of <u>4</u>
--------------------	--

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Angus Macdonald				Davis				
Inventor's Signature					Date		7/7/2000	
Residence: City	Sunnyvale	State	CA	Country	USA	Citizenship	USA	
Post Office Address		991 The Dalles Avenue						
Post Office Address								
City	Sunnyvale	State	CA	ZIP	94087	Country	USA	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
Patrick				McCormick				
Inventor's Signature					Date		7/9/2000	
City	Sunnyvale	State	CA	Country	USA	Citizenship	USA	
Post Office Address		1063 Morse Ave, Apt 15-203						
Post Office Address								
City	Sunnyvale	State	CA	ZIP	94089	Country	USA	
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor				
Given Name (first and middle (if any))				Family Name or Surname				
John				Giannandrea				
Inventor's Signature					Date		7/14/00	
City	Mountain View	State	CA	Country	USA	Citizenship	Britain	
Post Office Address		1310 Villa Street						
Post Office Address								
City	Mountain View	State	CA	ZIP	94041	Country	USA	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please Type a plus sign (+) inside this box →



PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

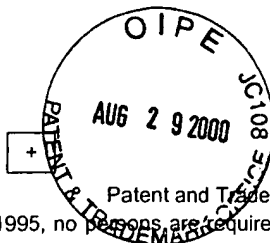
Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>3</u> of <u>4</u>
--------------------	--

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Andrew				Clarke			
Inventor's Signature						Date	7/11/2000
Residence: City	San Francisco	State	CA	Country	USA	Citizenship	USA
Post Office Address: 560 26th Avenue, Apt. 2							
Post Office Address:							
City	San Francisco	State	CA	ZIP	94121	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Tom				Thai			
Inventor's Signature						Date	7/7/00
City	Palo Alto	State	CA	Country	USA	Citizenship	USA
Post Office Address: 2929 Ramona Street							
Post Office Address:							
City	Palo Alto	State	CA	ZIP	94306	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Eckart				Walther			
Inventor's Signature						Date	6/11/00
City	Palo Alto	State	CA	Country	USA	Citizenship	Germany
Post Office Address: 1320 Byron Street							
Post Office Address:							
City	Palo Alto	State	CA	ZIP	94301	Country	USA

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.

Please Type a plus sign (+) inside this box →



PTO/SB/02A (3-97)

Approved for use through 9/30/98, OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it contains a valid OMB control number.

DECLARATION	ADDITIONAL INVENTOR(S) Supplemental Sheet Page <u>4</u> of <u>4</u>
--------------------	--

Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Daniel Joseph				Howard			
Inventor's Signature				Date		11/7/00	
Residence: City	Mountain View	State	CA	Country	USA	Citizenship	USA
Post Office Address		151 Calderon, #193					
Post Office Address							
City	Mountain View	State	CA	ZIP	94041	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
James Robert				Everingham			
Inventor's Signature				Date		7/11/2000	
City	Santa Cruz	State	CA	Country	USA	Citizenship	USA
Post Office Address		210 Almar Avenue					
Post Office Address							
City	Santa Cruz	State	CA	ZIP	95060	Country	USA
Name of Additional Joint Inventor, if any:				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle (if any))				Family Name or Surname			
Inventor's Signature				Date			
City		State		Country		Citizenship	
Post Office Address							
Post Office Address							
City		State		ZIP		Country	

Burden Hour Statement: This form is estimated to take 0.4 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Washington, DC 20231.